SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 970 / 19490

(check only one)

16 X 17a 17b 17c 17d 18

19a 19b 20a 20b 20c 21

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NAME OF COMMITTEE (In Full) CARSON AMERICA		
A. Full Name (Last, First, Middle Initial) MR. CHARLES G. BEAUDETTE Mailing Address 61 THOMPSON INN RD		Transaction ID : SA17.351837 Date of Receipt 08 19 _ 2015 _
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation N/A	100.00
Receipt For: 2016	Election Cycle-to-Date ▼ 600.00	
B. Full Name (Last, First, Middle Initial) MR. CHARLES G. BEAUDETTE		Transaction ID : SA17.466056 Date of Receipt
Mailing Address 61 THOMPSON INN RD	Ohaha Zin Oada	09 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SOUTH BRISTOL	State Zip Code ME 04568-4303	CONTRIBUTION
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer RETIRED	Occupation N/A	500.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 600.00	
Full Name (Last, First, Middle Initial) MS. DENISE BEAUDREAU	1	Transaction ID : SA17.323406 Date of Receipt
Mailing Address 84 FELLSWAY E.		08 11 2015
City MALDEN	State Zip Code MA 02148-8315	CONTRIBUTION
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer MASS EYE & EAR	Occupation MEDICAL TECHNOLOGIST	100.00
Receipt For: 2016 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date 300.00	
Subtotal Of Receipts This Page (optional)		700.00
Total This Period (last page this line n	umber only)	